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Prefix Serial								
DATE RECEIVED								
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# U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate	: change.)						
Ivus Industries, Inc.							
Filing Under (Check box(es) that apply): ☐Rule 504 ☐Rule 505 ☐Rule	506 Section 4(6)	ULOE					
Type of Filing: New Filing Amendment							
A. BASIC IDENTIFICATION D	ATA						
Enter the information requested about the issuer	·	<u> </u>					
Name of Issuer (☐check if this is an amendment and name has changed, and indicate change.)							
Ivus Industries, Inc.	· · · · · · · · · · · · · · · · · · ·						
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (	07073	715				
610 North Almon, Suite 130, Moscow, Idaho 83843	(208) 596-0929						
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Incl	uding Area Code	)				
(if different from Executive Offices) Not Applicable							
Brief Description of Business: We are a development-stage mining company form	ned to develop an ultract	apacitor technol	ogy that is				
used in flashlights and other rechargeable products.							
			PROCESSED				
Type of Business Organization			PHOCEGOED				
⊠corporation ☐ limited partnership, already formed	□other (pleas	e specify):					
business trust			<u>AUG 0 9 2007</u>				
Month	Year		4				
Actual or Estimated Date of Incorporation or Organization:  0 9	0 5 🛮 Actual	☐ Estimated	THOMSON				
		5 0	FINANCIAL				
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Po			W   A				
CN for Canada; FN for o	ther foreign jurisdiction	)	<del>}</del>				

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually-signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

-ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

SEC 1972 (5-87)

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner	of partnership issuers.			
Check Box(es) that Apply: ⊠Promoter	⊠Beneficial Owner	⊠Executive Officer	⊠Director	General and/or Managing Partner
Full Name (Last name first, if individual)			U	
Alexander, David				
Business or Residence Addresses (Number	and Street, City, State, Z	Zip Code)		
610 North Almon, Suite 130, Moscow, Ida	ho 83843 (Business Addi	ress)		200 100
Check Box(es) that Apply: ⊠Promoter	⊠Beneficial Owner	Executive Officer	⊠Director	☐General and/or Managing Partner
Full Name (Last name first, if individual)				
Atwell, David				
Business or Residence Addresses (Number	and Street, City, State, Z	(ip Code)		
610 North Almon, Suite 130, Moscow, Ida	ho 83843 (Business Addi	ress)		
Check Box(es) that Apply: ⊠Promoter	⊠Beneficial Owner	⊠Executive Officer	⊠Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Cegnar, Erik				
Business or Residence Addresses (Number	and Street, City, State, Z	Zip Code)		
610 North Almon, Suite 130, Moscow, Ida	ho 83843 (Business Add	ress)		
Check Box(es) that Apply: ⊠Promoter	☐Beneficial Owner	Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, if individual)	· ·			
Lee, Ken				
Business or Residence Addresses (Number	and Street, City, State, 2	Cip Code)		
610 North Almon, Suite 130, Moscow, Ida	ho 83843 (Business Add	ress)		
Check Box(es) that Apply: ⊠Promoter	⊠Beneficial Owner	⊠Executive Officer	⊠Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Portugal, Alan				
Business or Residence Addresses (Number	and Street, City, State, 2	Zip Code)		
610 North Almon, Suite 130, Moscow, Ida	ho 83843 (Business Add			
Check Box(es) that Apply: ☐Promoter	Beneficial Owner	☐Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Addresses (Number	and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Addresses (Number	and Street, City, State, 2	Zip Code)		
(Use blank s	heet, or conv and use add	litional copies of this shee	t, as necessary)	

					В. 1	NFORM	ATION A	BOUT O	FFERING	3				
	Answer also in Appendix, Column 2, if filing under ULOE.												No □	
	Does the offering permit joint ownership of a single unit? (if married)												Yes	No □
4. I	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Not Applicable													
Full Name (Last name first, if individual)														
Business or Residence Addresses (Number and Street, City, State, Zip Code)														
Nam	e of Asso	ciated Br	oker or De	aler										
State	s in Whi	h Person	Listed Ha	s Solicite	d or Inter	ids to So	licit Purcl	hasers					•••	
			r check in										□All S	tates
[AL] [IL] [MT] [RI]	[AK] [IN]	[AZ] [IA]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	_	
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				~ .			<del>_ · · · · - ·</del> _·							
Busii	iess or R	esidence	Addresses	(Number	and Stre	et, City, S	State, Zip	Code)						
Nam	e of Asso	ciated Br	oker or De	aler										
	•		Listed Ha										<u> </u>	
			r check in										□All S	tates
[AL] [IL] [MT] [RI]	[IN]	[IA]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
			first, if ind											
D	1005 0 - P	anidares	A dd=occo-	(NI)	and Ct-	at City	State 7:-	Code						
Business or Residence Addresses (Number and Street, City, State, Zip Code)														
Nam	e of Asso	ciated Br	oker or De	aler										
State	s in Whi	ch Person	Listed Ha	s Solicite	d or Inter	ids to So	licit Purc	hasers						
•			r check in		•								□All S	states
[AL] [IL] [MT] [RI]	[IN]	[IA]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this \( \subseteq \) box and indicate in the columns below the amounts of the convertion of the con				
	Type of Security			Ar	nount Already Sold
		_		\$	0
			1)	\$	0(1)
		. 4200,000		•	Ü
	<del></del>	<b>e</b> 0		\$	0
	· · · · · · · · · · · · · · · · · · ·			\$	0
	•			\$	0
				\$	$0^{(1)}$
		. \$200,000		Þ	U
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		Number Investors			Aggregate ollar Amount of Purchases
	Accredited Investors	. 0		\$	0
	Non-accredited Investors	Aggregate offering check this   box and indicate in the columns below the amounts of offered for exchange and already exchanged.    Security		\$	0
	Total (for filings under Rule 504 only)	. 0		\$	0
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Tuma of		Do	ollar Amount
	Type of Offering	~ -		D	Sold
	•	•		\$	0
				\$	0
	•			\$	0
				\$	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	•		\$	0
	Printing and Engraving Costs		$\boxtimes$	\$	150
	Legal Fees		$\boxtimes$	\$	6,350
	Accounting Fees	•	$\boxtimes$	\$	1,000
	Engineering Fees	•		\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify):			\$	0
	Total		$\boxtimes$	\$	7,500
(1) -	This is a minimum/maximum offering. The minimum aggregate offering is \$95,000.				

	<u>录码</u> ,	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE O	F PF	COCEEDS		7 .1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
t	С	nter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. his difference is the "adjusted gross proceeds to the issuer."				\$19	92,5	00 <sup>(2)</sup>
t f F	to be u furnisl payme	used for each of the purposes shown. If the amount for any purpose is not known, han estimate and check the box to the left of the estimate. The total of the ents listed must equal the adjusted gross proceeds to the issuer set forth in response						
ι	o Pan	t C – Questions 4.b above.			ments to			
				Dir	Officers, ectors & affiliates			yments to Others
	S	alaries and fees	. 🛛	\$	0	$\boxtimes$	\$	0
	P	urchase of real estate	. 🗀	\$	0		\$	0
	P	urchase, rental or leasing and installation of machinery and equipment	. 🔲	\$	0		\$	0
		Construction or leasing of plant buildings and facilities			0		\$	0
	A of	equisition of other businesses (including the value of securities involved in this fering that may be used in exchange for the assets or securities of another issuer						
	•	ursuant to a merger)		\$	0		\$	0
		epayment of indebtedness	_	\$	0		\$	0
		Vorking capital		\$	0	$\boxtimes$	\$	192,500
		other (specify):						
		olumn Totals	_	\$	0	$\boxtimes$		192,500
	T	otal Payments Listed (column totals added)			<b>⊠</b> \$19	2,50	0	
nos; e	averence	D. FEDERAL SIGNATURE			<del></del> _			
The follo	issuer wing	r has duly caused this notice to be signed by the undersigned duly authorized person signature constitutes an undertaking by the issuer to furnish to the U.S. Securities its staff, the information furnished by the issuer to any non-accredited investor pursu	and	Exc	hange Cor	nmis	sio	n, upon writter
		int or Type) Signature	$\left(\right)$		Date			
Ivus		stries, Inc.			July 1	5, 20	<u>)07</u>	<del></del>
	ie or s	Signer (Print or Type)  Title of Signer (Rrint or Type)						

	E. STATE SIGNATURE								
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?								
	See appendix, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the dersigned duly authorized person.								
Iss	uer (Print or Type) Date								
-	s Industries, Inc.  me (Print or Type)  July 15, 2007  Title (Print or Type)								

Chief Executive Officer

#### instruction:

David Alexander

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				Al	PPENDIX				
1	Intend non-ac investor	to sell to credited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		х	Common (\$35,000)						
со									
СТ						_			
DE									
DC									
FL									
GA									!
ні									
ID		х	Common (\$55,000)	0	0	0	0		x
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
МА									
МІ									
MN									
MS		<u> </u>							
МО									

The common   The	·——	· · · · · · · · · · · · · · · · · · ·			A]	PPENDIX					
State         Ves         No         Accredited Investors         Amount         Yes         No           MT         I         I         I         Investors         Amount         Yes         No           NE         I         I         I         I         I         I         I           NV         I         I         I         I         I         I         I         I           NV         I	1	Intend non-ac	to sell to credited s in State	and aggregate offering price offered in state	Numbered	4  Type of investor and  Amount purchased in State					
MT					Accredited		Accredited				
NE		Yes	No	<u> </u>	Investors	Amount	Investors	Amount	Yes	No	
NV         Image: control of the c						<del></del>					
NH						·					
NM	<u> </u>					<u> </u>					
NM											
NY	<u> </u>					<u>.                                    </u>		. ·			
NC         Image: Company (\$2,000)					:	<del></del> .					
ND         Image: Common (\$2,000)         Ima							<del> </del>				
OH         Image: Common (\$2,000)         Ima									<u> </u>		
OK         X         Common (\$2,000) <t< td=""><td></td><td></td><td> </td><td></td><td>-</td><td></td><td></td><td>· · · ·</td><td></td><td></td></t<>					-			· · · ·			
OR         X         Common (\$2,000) <t< td=""><td>-</td><td></td><td></td><td><u> </u></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	-			<u> </u>							
PA         Image: Common (\$100,000)	<b></b>		x	Common (\$2,000)							
RI			<b> </b>								
SC	<del></del>				<u> </u>						
SD         Image: Control of the c											
TN	-							···-			
UT	-										
VT         Image: Control of the c	TX		х	Common (\$8,000)							
VA	UT		-								
WA         X         Common (\$100,000)	VT										
WV	VA										
WI WY WY	WA		х	Common (\$100,000)							
WY	wv										
	WI							.=			
PR PR	WY										
	PR										